liquid contained in the syringe **86**, through the needle extension assembly **84** and epidural needle **82**, to a desired nerve block site B (**FIG. 8**). In addition, the glass syringe **86**, preferably, is also suitable for connection to one of needles **68**, **70** for the purpose of loading the syringe **86** with a desired anesthetic from its vial.

[**0060**] The illustrated plastic syringe **88** is of a commercially available variety and preferably has a 10 cc capacity. The kit **10** additionally contains a filter needle **89**, which is preferably a 19 gage×1.5" commercially available filter needle. In combination, the plastic syringe **88** and the filter needle **89** are useful to extract an anesthetic drug from a vial. The full syringe **88**, with the needle **89** removed, may be directly connected to a suitable fill hub on the infusion system **92**. In this manner, the syringe **88** may be used to fill a reservoir of the infusion system **92**, as will be described in more detail below.

[**0061**] The illustrated catheter assembly **90** is a commercially available catheter suitable to transport a liquid drug from the infusion system **92** to the desired block site. The catheter **90** is also preferably suitable to be threaded through the epidural needle **82**, in a known manner, to reach the desired block site. A proximal end of the catheter includes a removable connector **90***a* suitable to connect to a connector of the infusion system **92**.

[**0062**] The infusion system **92** of the illustrated pain management kit **10** is also commercially available. With reference to **FIG. 7**, the infusion system **92** generally comprises a reservoir **94** in fluid communication with a length of medical tubing **96**. The tubing **96** connects the reservoir **94** with a connector **97** suitable for connection to the connector **90***a* of the catheter **90**, as described above. While stored within the kit **10**, the infusion system **92** is preferably disposed generally in the space S2.

[**0063**] The infusion system **92** preferably also includes a catheter holder **95**, which is capable of securing both the connector **97** of the infusion system **92** and the exposed portion of the catheter **90**. Preferably, the catheter holder **95** has an adhesive backing suitable for use in a medical environment. Thus, the catheter holder **95** is useful to inhibit unintentional removal of the catheter **90**. A preferred catheter holder **95** is commercially available under the brand name STATLOCK.

[**0064**] Preferably, a fill hub **98**, a clamp **100** and a filter **102** are placed along the tubing **96**, between the reservoir **94** and the connector **97**. The fill hub **98** is capable of selectively permitting fluid communication between a syringe, such as the above-described syringe **88**, and the lumen of the medical tubing **96**. The clamp **100** is a conventional clamp which is suitable to selectively permit, or occlude, fluid flow within the tubing **96**. The filter **102** is also commercially available and is suitable to separate the drug from any contaminates found in the drug. The filter is also suitable to eliminate air from the fluid path.

[**0065**] With reference to **FIGS. 8 and 9**, the items that are desirable for performing the pain management procedure and are not included in the pain management kit **10** generally comprise a nerve stimulator **104** (i.e., a current generating power source), an infusion pump **106**, and the anesthetic **108**. A desired nerve stimulator **104** is useful for generating a current to be applied to the epidural needle **82**, as described above. A desired infusion pump **106** is useful for inducing a compressing force on the reservoir **94** of the infusion system **92** to expel a drug contained therein. The anesthetic drug **108** acts on the target nerve bundle to inhibit nerve signals from passing therethrough.

[**0066**] The nerve stimulator **104** is a non-sterile electronic device that is reusable. Therefore, it would be undesirable to include the nerve stimulator **104** in the otherwise disposable pain management kit **10**. Similarly, the infusion pump **106** is reusable and, therefore, would also be undesirable to include in the kit **10**. The anesthetic drug **108** is desirably not included with the pain management kit **10** because the choice of drug **108** may vary widely among practitioners using the kit **10**.

[**0067**] Method of Using the Pain Management Kit

[**0068**] The contents of the pain management kit **10**, individually, and their method of use, are generally known in the performance of continuous nerve blocks, and is understood by those of skill in the art. As such, the method of use of the kit **10** will be described only in general detail that is helpful to exemplify certain features and advantages of the pain management kit **10**. Specifically, the method of use of the pain management kit **10** will be described in relation to an interscalene block procedure (i.e., a nerve block of the brachial plexus at the interscalene groove).

[**0069**] With primary reference to **FIGS. 8 and 9**, the continuous nerve block procedure is preferably performed in a prep room before the patient enters the OR. To begin the procedure, the protective cover **14** is removed from the outer container **12**, exposing the sterile wrap **23** (**FIG. 1**). The tape is removed and the corners of the sterile wrap **23** are folded back to expose the sterile medical supplies contained within the pain management kit **110**. The absorbent towel **27** may be removed for later use.

[**0070**] To create a sterile field, the drape **28** is removed from its place on the sterile field tray **24**, and is unfolded and placed over the patient. The drape **28** is positioned such that the pierce site P is exposed within the cutout. For the purpose of clarity, the drape **28** has been omitted from **FIGS. 8 and 9**. The skin prep pad **30** is used to clean the patient's skin in the area surrounding the pierce site P. The iodine solution **32** is then applied to the skin surrounding the pierce site P with one or more of the prep sticks **34**, in order to sterilize the pierce site P. Advantageously, the sterile field tray **24** may then be removed to expose the contents of the main tray **26**.

[**0071**] To perform the local anesthetic procedure, one of the needles **68**, **70** and one of the syringes **72**, **74** are removed from their respective recesses **60** and assembled. One of the vials of Lidocaine **76**, **78** are selected, removed from its recess **60** and opened. The syringe and needle assembly (not shown) is loaded with Lidocaine with the Sodium Chloride solution **80** being optionally used as a dilutant. An injection is then made proximate to the desired pierce site P to anesthetize the area for insertion of the epidural needle **82**. The gauze pads **36** may be removed from the sterile field tray **24**, which has been set aside, and used to control any bleeding that may occur due to the injection of local anesthetic.

[**0072**] To perform the actual nerve block portion of the procedure, first, the infusion system **92** is removed from the